

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Santarsiero for Congress

A. Full Name (Last, First, Middle Initial) Ann M Shenkle		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2015	
Mailing Address 9 Belmont Square		Transaction ID : VPF8VGA6FW2	
City Doylestown	State PA	Zip Code 18901	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 475.00		
		* Earmarked Contribution: See Below	

B. Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2015	
Mailing Address PO Box 441146		Transaction ID : VPF8VGA6FW2E	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer	Occupation Conduit total listed in Agg. field		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 18286.69		
		[MEMO ITEM] Note: Above Contribution earmarked through this organization.	

C. Full Name (Last, First, Middle Initial) Arlene Schaupp		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2015	
Mailing Address 2621 Greer Rd		Transaction ID : VPF8VG885X2	
City Palo Alto	State CA	Zip Code 94303-3730	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 550.00
TOTAL This Period (last page this line number only).....	_____